## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

Alexandria, Virginia 22313-1450

(703) 746-4000 or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

23552 : MERCHANT & P.O. BOX 2903 MINNEAPOLIS, 5/2005 SSITHIB2 00000	MN 55402-0903	FB 1	1 2005. W	te of mailing can only be used it. This certificate cannot be used itional paper, such as an assigntr ficate of mailing or transmission.  Certificate of Mailing or Transmittal is being the such as this Fee(s) Transmittal is being the sufficient postage for Mail Stop ISSUE FEE addres USPTO (703) 746-4000, on the	asmission EV4958684660 and deposited with the Unite PK6488 mail in an envelor above, or being facsimi date indicated below.
C:1501	1400.00 DP		David Ortiz	<del></del>	(Depositor's name
C:1504 C:8001	300.00 OP 6.00 OP		February 1	1, 2005	(Signatur (Dat
APPLICATION NO.	FILING DATE	FIRST	NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/626,935	07/25/2003	Y	oshitomo Ihashi	13425.34US01	5414
APPLN. TYPE nonprovisional	NO MINER	S1370  ART UNIT	PUBLICATION FEE \$300	\$1670	03/08/2005
	MINER N, JERRY E	3634	049-339000		
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.		
Number is required.		IE DRINTED ON THE D	ATENT (print or type)		
3. ASSIGNEE NAME AND	D RESIDENCE DATA TO E is an assignee is identified b in 37 CFR 3.11. Completion		will appear on the patent. If an a bstitute for filing an assignment.	ssignee is identified below, the	document has been filed:
3. ASSIGNEE NAME AND	ss an assignee is identified b in 37 CFR 3.11. Completion	elow, no assignce data v of this form is NOT a sul	· / /		document has been filed t
3. ASSIGNEE NAME AND PLEASE NOTE: Unles recordation as set forth i	ss an assignee is identified b in 37 CFR 3.11. Completion	elow, no assignee data v of this form is NOT a sul (B) RES	will appear on the patent. If an a bstitute for filing an assignment.		document has been filed
3. ASSIGNEE NAME AND PLEASE NOTE: Unles recordation as set forth i  (A) NAME OF ASSIGN Honda Gike	is an assignee is identified b in 37 CFR 3.11. Completion NEE en Kogyo Kabushiki k	elow, no assignee data v of this form is NOT a sul (B) RES Kaisha	will appear on the patent. If an a bstitute for filing an assignment.  SIDENCE: (CITY and STATE OR	COUNTRY)	
3. ASSIGNEE NAME AND PLEASE NOTE: Unles recordation as set forth in  (A) NAME OF ASSIGN Honda Gike Please check the appropriate  4a. The following fee(s) are	s an assignee is identified b in 37 CFR 3.11. Completion NEE en Kogyo Kabushiki k te assignee category or catego	elow, no assignee data voof this form is NOT a sul (B) RES (aisha pries (will not be printed of 4b. Payr	will appear on the patent. If an a bstitute for filing an assignment.  SIDENCE: (CITY and STATE OR Tokyo, Japan on the patent):  Individual (ment of Fee(s):	COUNTRY)  **Corporation or other private g	
3. ASSIGNEE NAME AND PLEASE NOTE: Unles recordation as set forth in  (A) NAME OF ASSIGN Honda Gike  Please check the appropriat  4a. The following fee(s) are Issue Fee	is an assignee is identified bin 37 CFR 3.11. Completion NEE on Kogyo Kabushiki kata assignee category or category enclosed:	elow, no assignee data voof this form is NOT a sul (B) RES (aisha pries (will not be printed of the Payr	will appear on the patent. If an a bestitute for filing an assignment.  SIDENCE: (CITY and STATE OR Tokyo, Japan on the patent): Individual (ment of Fee(s):	COUNTRY)  Corporation or other private g is enclosed.	
AND PLEASE NOTE: Unles recordation as set forth in (A) NAME OF ASSIGN Honda Gike  Please check the appropriate ta. The following fee(s) are Issue Fee Publication Fee (No	is an assignee is identified bin 37 CFR 3.11. Completion NEE In Kogyo Kabushiki kate assignee category or categore enclosed: small entity discount permitt	elow, no assignce data voof this form is NOT a sul (B) RES  (aisha  ories (will not be printed of 4b. Payr	will appear on the patent. If an a bestitute for filing an assignment.  SIDENCE: (CITY and STATE OR Tokyo, Japan on the patent): Individual ment of Fee(s):  a check in the amount of the fee(s) ayment by credit card. Form PTO	COUNTRY)  Corporation or other private g is enclosed. 2038 is attached.	roup entity 🚨 Governme
3. ASSIGNEE NAME AND PLEASE NOTE: Unles recordation as set forth in  (A) NAME OF ASSIGN Honda Gike  Please check the appropriat  4a. The following fee(s) are Issue Fee	is an assignee is identified bin 37 CFR 3.11. Completion NEE In Kogyo Kabushiki kate assignee category or categore enclosed: small entity discount permitt	elow, no assignce data voof this form is NOT a sul (B) RES  (aisha  ories (will not be printed of 4b. Payr	will appear on the patent. If an a bestitute for filing an assignment.  SIDENCE: (CITY and STATE OR Tokyo, Japan on the patent): Individual (ment of Fee(s):	COUNTRY)  Corporation or other private g is enclosed. 2038 is attached.	roup entity 🚨 Governme

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandra, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Typed or printed name Curtis B. Hamre

Authorized Signature \_

Date February 11, 2005

Registration No. 29,165

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

**IHASHI** 

Serial No .:

10/626,93 July 25, 2

Filed:

Confirmation

No.:

5414

Examiner:

Jerry E. Redman

Group Art Unit:

Notice of Allow.

3634

Docket:

13425.0034US01

December 8, 2004

Date:

Due Date:

3

March 8, 200

Title:

STRUCTURE OF DOOR OPENING/CLOSING APPARATUS

CERTIFICATE UNDER 37 CFR 1.10:

"Express Mail" mailing label number: EV 495868466 US

Date of Deposit: February 11, 2005

I hereby certify that this paper or fee is being deposited with the U.S. Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop Issue Fee, Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313

Name: David Ortiz

Mail Stop Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

PATENT TRADEMARK OFFICE

Sir:

We are transmitting herewith the attached:

- ☐ Transmittal Sheet in duplicate containing Certificate of Mailing
- ☐ Issue Fee Transmittal Part B (PTOL 85)
- Check(s) in the amount of \$1400.00 for payment of the Issue Fee, \$300.00 for payment of the publication fee, and \$6.00 for patent copies
- Return postcard

Please consider this a PETITION FOR EXTENSION OF TIME for a sufficient number of months to enter these papers or any future reply, if appropriate. Please charge any additional fees or credit overpayment to Deposit Account No. 13-2725. A duplicate of this sheet is enclosed.

> Merchant & Gould P.C. P.O. Box 2903 Minneapolis, MN 55402-0903 612.332.5300

Name: Curtis B. Hamre

Reg. No.: 29,165 CBH/sbd